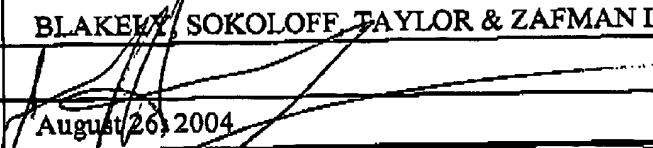
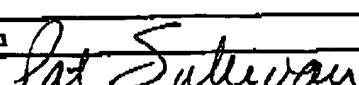


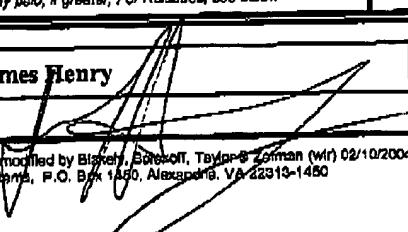
TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application No.	09/388,804
		Filing Date	September 1, 1999
		First Named Inventor	Pete M. Moore
		Art Unit	2667
		Examiner Name	Anh Vu H. Ly
Total Number of Pages in This Submission	17	Attorney Docket Number	81862P157

ENCLOSURES (check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):	
		Facsimile Transmittal Sheet	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	James Henry, Reg. No. 41,064 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	August 26, 2004

CERTIFICATE OF MAILING/TRANSMISSION	
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.	
Typed or printed name	Pat Sullivan
Signature	
Date	August 26, 2004

Based on PTO/SB/21 (04-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wtr) 06/04/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

FEE TRANSMITTAL for FY 2004		<i>Complete if Known</i>																																																																																																																																	
<i>Effective 10/01/2004. Patent fees are subject to annual revision.</i>		Application Number 09/388,804 Filing Date September 1, 1999 First Named Inventor Pete M. Moore Examiner Name Anh Vu H. Ly Art Unit 2667 Attorney Docket No. 81862P157																																																																																																																																	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.																																																																																																																																			
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Deposit Account Number 02-2666 Deposit Account Name Blakely, Sokoloff, Taylor & Zafman LLP		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity</th> <th style="text-align: left;">Small Entity</th> <th style="text-align: left;">Fee Description</th> <th style="text-align: left;">Fee Paid</th> </tr> </thead> <tbody> <tr><td>Fee Code</td><td>Fee (\$)</td><td>Fee Code</td><td>Fee (\$)</td></tr> <tr><td>1051</td><td>130</td><td>2051</td><td>85</td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td></tr> <tr><td>2063</td><td>130</td><td>2053</td><td>130</td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td></tr> <tr><td>1804</td><td>820 *</td><td>1804</td><td>920 *</td></tr> <tr><td>1805</td><td>1,840 *</td><td>1805</td><td>1,840 *</td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td></tr> <tr><td>1252</td><td>420</td><td>2252</td><td>210</td></tr> <tr><td>1253</td><td>930</td><td>2253</td><td>475</td></tr> <tr><td>1254</td><td>1,480</td><td>2254</td><td>740</td></tr> <tr><td>1255</td><td>2,010</td><td>2255</td><td>1,005</td></tr> <tr><td>1404</td><td>830</td><td>2401</td><td>165</td></tr> <tr><td>1402</td><td>330</td><td>2402</td><td>165</td></tr> <tr><td>1403</td><td>290</td><td>2403</td><td>145</td></tr> <tr><td>1451</td><td>1,510</td><td>2451</td><td>1,510</td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td></tr> <tr><td>1453</td><td>1,330</td><td>2453</td><td>665</td></tr> <tr><td>1501</td><td>1,330</td><td>2501</td><td>665</td></tr> <tr><td>1502</td><td>480</td><td>2502</td><td>240</td></tr> <tr><td>1503</td><td>840</td><td>2503</td><td>320</td></tr> <tr><td>1450</td><td>180</td><td>2450</td><td>130</td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td></tr> <tr><td>1808</td><td>180</td><td>1808</td><td>180</td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td></tr> <tr><td>1809</td><td>770</td><td>1809</td><td>385</td></tr> <tr><td>1810</td><td>770</td><td>2810</td><td>385</td></tr> <tr><td>1801</td><td>770</td><td>2801</td><td>385</td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>800</td></tr> <tr><td colspan="4" style="text-align: center;">Other fee (specify) _____</td></tr> <tr><td colspan="2" style="text-align: right;">* or number previously paid, if greater. For Reissues, see below</td><td colspan="2" style="text-align: right;">SUBTOTAL (3) (\$)</td></tr> </tbody> </table>		Large Entity	Small Entity	Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1051	130	2051	85	1052	50	2052	25	2063	130	2053	130	1812	2,520	1812	2,520	1804	820 *	1804	920 *	1805	1,840 *	1805	1,840 *	1251	110	2251	55	1252	420	2252	210	1253	930	2253	475	1254	1,480	2254	740	1255	2,010	2255	1,005	1404	830	2401	165	1402	330	2402	165	1403	290	2403	145	1451	1,510	2451	1,510	1452	110	2452	55	1453	1,330	2453	665	1501	1,330	2501	665	1502	480	2502	240	1503	840	2503	320	1450	180	2450	130	1807	50	1807	50	1808	180	1808	180	8021	40	8021	40	1809	770	1809	385	1810	770	2810	385	1801	770	2801	385	1802	900	1802	800	Other fee (specify) _____				* or number previously paid, if greater. For Reissues, see below		SUBTOTAL (3) (\$)	
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Name (Print/Type) James Henry		Registration No. (Attorney/Agent) 41,064																																																																																																																																	
Signature 		Telephone (714) 557-3800																																																																																																																																	
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